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CERTIFICATE OF MAILING BY FIRST CLASS MAIL (37 CFR 1.8)

Applicant(s): **Hole et al.**

Docket No.

24647-81901 (0-03-192)

Application No.

10/658,665

Filing Date

September 10, 2003

Examiner

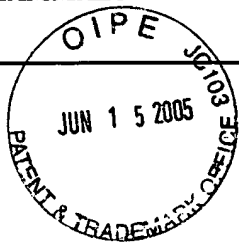
Customer No.

34492

Group Art Unit

3763

Invention: **USE OF NITRIC OXIDE AND A DEVICE IN THE THERAPEUTIC MANAGEMENT OF PATHOGENS IN MAMMALS**



I hereby certify that this **Revocation of Power of Attorney with New Power of Attorney and Change of Address** (2pp.)
(Identify type of correspondence)

is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on
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Melody K. Gutierrez

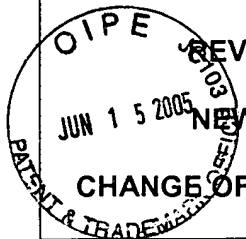
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A handwritten signature in black ink, appearing to read "Melody K. Gutierrez".

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**REVOCATION OF POWER OF
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AND
CHANGE OF CORRESPONDENCE ADDRESS**

| | |
|------------------------|------------------------|
| Application Number | 10/658,665 |
| Filing Date | September 10, 2003 |
| First Named Inventor | HOLE et al. |
| Art Unit | 3763 |
| Examiner Name | |
| Attorney Docket Number | 24647-81901 (0-03-192) |

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 34492

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected herewith.

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number: 34492

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Doug Hole

Date:

6-2-05

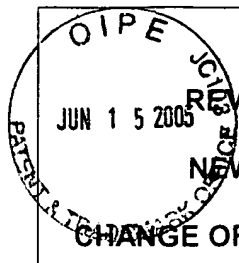
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☒ *Total of 2 forms are submitted.

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SIGNATURE of Applicant or Assignee of Record

Signature

Name

Christopher C. Miller

Date:

5-19-05

Telephone:

780-662-3968

NOTE: Signature of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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